

overnight," because Medicare is already proposed to go broke by 2015 to 2017.

I think that is the problem we run into when we try and build upon a foundation that is already crumbling. The Medicare Program is destined to go bankrupt. We are talking about adding a whole new entitlement. Instead of trying to figure out how to plow some of these savings back into Medicare and make it sustainable, we are actually adding to and building upon a foundation that is already crumbling.

Mr. ALEXANDER. We have about a minute and a half left in our time. I wonder if Senator BROWNBACK would conclude.

Mr. BROWNBACK. Mr. President, I think to put it in Kansas-type terms, if you are talking about taking savings from Medicare to start a whole new health care entitlement program, that is like writing a big fat check on a completely overdrawn bank account to buy a new car.

You are going: Now, well, who would do something like that? When you are saying: Well, that is what the Federal Government is looking at doing in this proposal that Senator BAUCUS has put forward.

Medicare is not sustainable. It is not fiscally sound. You are going to write an overdraft check on that to start a whole new program that you do not have the wherewithal to do, that most Americans do not want to see you do because they want to see you fix the current program and get it on a sustainable basis.

It does not make sense. It is out of the stream of thought of the American public. We ought to back up, stop, and go at this in incremental changes, to get costs down and more people covered, that do not drive costs up, that do not do a big federal takeover of the system.

Mr. ALEXANDER. I thank Senators THUNE and BROWNBACK.

Obviously, we believe that instead of a 1,000-page bill, we should do what Senator BROWNBACK said. We should go step by step to re-earn the trust of the American people. For example, permitting small business plans to pool their resources to offer more insurance to a million people; buying insurance across State lines; stopping runaway junk lawsuits against doctors; signing up those people already eligible for Medicaid and SCHIP; and encouraging technology.

All of those are steps we can agree on and reduce costs, without running trillions of dollars of new debt, more taxes, and Medicare cuts. I thank the Senators from South Dakota and Kansas for participating in our colloquy.

I yield the floor.

RECOGNITION OF THE MINORITY LEADER

The PRESIDING OFFICER (Mrs. SHAHEEN). The Republican leader is recognized.

HEALTH CARE WEEK X, DAY III

Mr. MCCONNELL. Madam President, over the past several months, the American people have made their voices heard in the debate over health care. Everyone is frustrated at the high cost of even routine services and procedures. But the good news is this: everyone agrees that these are real and pressing issues and that Congress can and should do something to help.

Unfortunately, the Democrat plan being contemplated here in Congress is not content simply to address the problems at hand. Instead, this plan uses these problems as an excuse to dismantle the current health care system, slap together a new one as quickly as possible, and force it on the American people whether they like it or not.

That is what is going on this week in the hearing room of the Finance Committee.

The U.S. Congress is hashing out the details of an enormously complicated bill that calls for a massive expansion of Washington's role in the health decisions of every single American. And when they are done, they plan to rush this so-called reform through Congress and force it on a country that is overwhelmingly opposed to it.

But there is really only one thing Americans need to know about this legislation: When all the talking is through, what is left is this: a trillion dollar experiment that cuts Medicare, raises taxes, and threatens the health care options that millions of Americans enjoy.

The administration has been telling Americans for months and months that if they like the coverage they have, they can keep it. Whoever believes this apparently is not familiar with the bill that Democrats in Congress want the President to sign. If they were, they would realize that it creates a new government standard for coverage, and that anyone who falls below that standard will be forced to buy a different health plan.

Government would tell you which plans you can have and which ones you can not, and if you do not like the plan they suggest, then you will have to send a check to Washington. You will get taxed. That is government expansion. Americans do not want it.

Americans are worried about spending. It seems like every time they turn around they are hearing about another trillion-dollar spending bill coming out of Washington. Well here is another. Once again, it is being rushed through Congress, and once again, we will not have enough time to read it. They made sure of that yesterday. My Republican colleague from Kentucky, Senator BUNNING, offered an amendment to give senators the time they need to study the details. Democrats struck it down.

Taxes are already high enough. They are about to get higher. This legislation will lead to significantly higher taxes on just about everybody in America. If you have health insurance, you

are taxed. If you do not have health insurance, you are taxed. If you need prescription medicine, you are taxed. If you need a medical device, you are taxed.

All these taxes would be bad enough if they were not so hard to understand.

For months we have been hearing that the goal of reform is to lower costs. Yet any school kid in America can tell you that raising taxes on something raises its cost. And every nonpartisan, independent study we have seen confirms this basic economic principle. Despite all the talk of lowering costs, all these higher taxes mean that, as a result of this legislation, health care costs are headed in one direction, and that is up.

What is worse, the Joint Committee on Taxation and the Congressional Budget Office say that some of the worst taxes would fall squarely on the backs of consumers: not on the rich, but on ordinary Americans who are already struggling through a recession.

Seniors take a serious hit from this legislation, either through cuts in services that millions of them currently enjoy, or by being forced off the plans they have. All told, this bill calls for nearly \$140 billion in cuts to Medicare Advantage; nearly \$120 billion in Medicare cuts for hospitals that care for seniors; more than \$40 billion in cuts to home health agencies; and nearly \$8 billion in cuts to hospice care.

Everyone agrees Medicare needs reform. This is not reform. This is a massive raid on a program millions of seniors depend on in order to cover the cost of another new government program. This bill uses Medicare as a piggy bank to pay for this experiment.

There is no question that Americans want health care reform. They want lower costs. They want greater access. They want commonsense reforms, like a plan to get rid of junk lawsuits on doctors and hospitals and to level the playing field when it comes to taxes on health plans. But what they are getting from Congress instead is a trillion-dollar experiment that cuts Medicare, raises taxes, and threatens the health care options that millions of Americans now enjoy. And here is the worst part: they are being told that all this has to be rushed through Congress on some artificial timeline.

Americans have been asking us to slow down. Congress is doing the opposite.

This is not how Americans expect us to do their business. We need nonpartisan groups like the Congressional Budget Office to tell us how much this legislation will cost and how we would pay for it, and we need to slow down and get it right. We need to give Members of Congress the time they need to understand what they are going to be voting on. And we need to give the American people the time they need to understand this legislation too. This bill is too big, too costly, and too important to allow anything less.

I yield the floor and I suggest the absence of a quorum.